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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**☒ Declaration
Submitted
With Initial
Filing

OR

☐ Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number	GHL-P002
First Named Inventor	David A. Schleppentach
COMPLETE IF KNOWN	
Application Number	
Filing Date	
Art Unit	
Examiner Name	

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

COMMUNICATION SYSTEM AND METHODS

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY)

11/15/2004

as United States Application Number or PCT International

Application Number PCT/US2004/038141 and was amended on (MM/DD/YYYY) 09/13/2005 (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 385(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
			<input type="checkbox"/>	YES <input type="checkbox"/>	NO <input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.

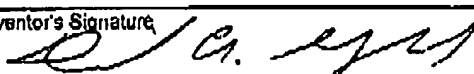
(Page 1 of 2)

This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to:	<input type="checkbox"/> The address associated with Customer Number:		OR	<input checked="" type="checkbox"/> Correspondence address below
Name KEITH J. SWEDO				
Address ONE INDIANA SQUARE, SUITE 3500				
City INDIANAPOLIS		State INDIANA	ZIP 46204	
Country USA	Telephone 317-713-3446		Email KSWEDO@SOMMERBARNARD.COM	
WARNING: Petitioner/applicant is cautioned to avoid submitting personal information in documents filed in a patent application that may contribute to identity theft. Personal information such as social security numbers, bank account numbers, or credit card numbers (other than a check or credit card authorization form PTO-2038 submitted for payment purposes) is never required by the USPTO to support a petition or an application. If this type of personal information is included in documents submitted to the USPTO, petitioners/applicants should consider redacting such personal information from the documents before submitting them to the USPTO. Petitioner/applicant is advised that the record of a patent application is available to the public after publication of the application (unless a non-publication request in compliance with 37 CFR 1.213(a) is made in the application) or issuance of a patent. Furthermore, the record from an abandoned application may also be available to the public if the application is referenced in a published application or an issued patent (see 37 CFR 1.14). Checks and credit card authorization forms PTO-2038 submitted for payment purposes are not retained in the application file and therefore are not publicly available.				
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.				
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any)) DAVID A.		Family Name or Surname SCHLEPPENBACH		
Inventor's Signature 			Date 5/11/05	
Residence: City LAFAYETTE	State INDIANA	Country USA	Citizenship USA	
Mailing Address 1906 NORTH 15TH				
City LAFAYETTE	State INDIANA	Zip 47904	Country USA	
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the 1 supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.				

DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet
--------------------	---

Name of Additional Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
J. P. 2		SAID	
Inventor's Signature		Date	
WEST LAFAYETTE		INDIANA	USA
Residence City		State	Country
5809 NORTH 78 EAST			CANADA
Mailing Address			Citizenship
WEST LAFAYETTE		INDIANA	47906
City		State	Zip
USA		Country	
Name of Additional Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
ABRAHAM		NEMETH	
Inventor's Signature		Date	
SOUTHFIELD		MICHIGAN	USA
Residence City		State	Country
24111 CIVIC CENTER BLVD			USA
Mailing Address			Citizenship
SOUTHFIELD		MICHIGAN	48034
City		State	Zip
USA		Country	
Name of Additional Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence City		State	Country
Mailing Address			Citizenship
City		State	Zip
			Country

This collection of information is required by 35 U.S.C. 116 and 37 CFR 1.45. The information is required to obtain or retain a benefit by the public which is in the public interest. Confidentiality is guaranteed by 35 U.S.C. 122 and 37 CFR 1.41 and 1.14. This collection is intended to take 21 minutes to complete, including review. Any person who provides this information to the USPTO is deemed to have authorized the USPTO to use the information for the purposes of the USPTO. The information should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22314-1450. DO NOT SEND FILES OR COMPLETED FORMS TO THIS ADDRESS.

If you need assistance in completing the form, call 1-800-PTO-5100 (1-800-765-5100) and select option 2.

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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	PCT/US04/38141
Filing Date	Nov. 15, 2004
First Named Inventor	Schleppenbach
Title	Communication System and Methods
Art Unit	
Examiner Name	
Attorney Docket Number	GHL-P002

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

☐ Practitioners associated with the Customer Number:

OR

☒ Practitioner(s) named below:

Name	Registration Number
Keith J. Swedo	43,176

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☐ The address associated with the above-mentioned Customer Number:

OR

☐ The address associated with Customer Number:

OR

☒ Firm or Individual Name
Sommer Barnard PC
Address
One Indiana Square, Suite 3500

City Indianapolis State Indiana Zip 46204
Country USA
Telephone 317-713-3440 Email kswedo@sommerbarnard.com

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	<i>David Schleppenbach</i>	Date	5/11/06
Name	David Schleppenbach	Telephone	
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 4 forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND P&S OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1460.

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CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	PCT/US04/38141
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First Named Inventor	Schleppenhach
Title	Communication System and Methods
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Examiner Name	
Attorney Docket Number	GHL-P002

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OR

☒ Practitioner(s) named below:

Name	Registration Number
Keith J. Swedo	43,176

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

☐ The address associated with the above-mentioned Customer Number:

OR

☐ The address associated with Customer Number:

OR

<input checked="" type="checkbox"/> Firm or Individual Name	Sommer Barnard PC				
Address	One Indiana Square, Suite 9500				
City	Indianapolis	State	Indiana	Zip	46204
Country	USA				
Telephone	317-713-3446	Email	kswedo@sommerbarnard.com		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/95)

SIGNATURE of Applicant or Assignee of Record

Signature	<i>[Signature]</i>	Date	5-12-06
Name	Joe P. Said	Telephone	650 775 3776
Title and Company	Founder gh, LLC		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 4 forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 36 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1480, Alexandria, VA 22313-1450.

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**POWER OF ATTORNEY
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Application Number	PCT/US04/38141
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First Named Inventor	Schleppenbach
Title	Communication System and Methods
Art Unit	
Examiner Name	
Attorney Docket Number	GHL-P002

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I hereby appoint:

☐ Practitioners associated with the Customer Number:

OR

☒ Practitioner(s) named below:

Name	Registration Number
Karin J. Swedo	48,176

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Please recognize or change the correspondence address for the above-identified application to:

☐ The address associated with the above-mentioned Customer Number:

OR

☐ The address associated with Customer Number:

OR

☒ Firm or Individual Name:

Sommer Darnard PC

Address:

One Indiana Square, Suite 3000

City:

Indianapolis

State:

Indiana

Zip:

46204

Country:

USA

Telephone:

317-713-3440

Email:

kswedo@sonnerdarnard.com

I am the:

☒ Applicant/Inventor.

☐ Assignee of record.
Statement under oath.

(The entire interest. See 37 CFR 3.71.
CFR 3.71(p) is enclosed. (Form PTO/SB/95)

SIGNATURE of Applicant or Assignee of Record

Signature:

[Signature]

Date:

5-18-06

Name:

Abraham Nemeth

Telephone:

248-336 5353

Title and Company:

LLC

NOTE: Signatures of all the assignees of record of the entire interest or their representatives are required. Signatures must be on the original form.

☒ Total of 4 forms are submitted.

forms are submitted.

This collection of information is required by 37 CFR 1.52, 1.53 and 1.54. The information is required to obtain or maintain a benefit by the public within in the (and by the USPTO) in process. Confidentiality is governed by 36 U.S.C. 122 and 37 CFR 1.51 and 1.54. This collection is submitted to take 3 minutes to complete, including gathering information on the form of the U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22304-4450. DO NOT SEND ANY OF COMPLETED FORMS TO THIS ADDRESS. If you need assistance in completing the form, call 1-800-PTO-6100 and select option 2.

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CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	PCT/US04/38141
Filing Date	Nov. 15, 2004
First Named Inventor	Schleppenbach
Title	Communication System and Methods
Art Unit	
Examiner Name	
Attorney Docket Number	GHL-P002

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I hereby appoint:

☐ Practitioners associated with the Customer Number:

OR

☒ Practitioner(s) named below:

Name	Registration Number
Keith J. Swedo	43,176

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☐ The address associated with the above-mentioned Customer Number.

OR

☐ The address associated with Customer Number:

OR

☒ Firm or Individual Name Sommer Barnard PC

Address

One Indiana Square, Suite 3500

City

Indianapolis

State

Indiana

Zip

46204

Country

USA

Telephone

317-713-3446

Email

kswedo@sommerbarnard.com

I am the:

☐ Applicant/Inventor.

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/95)

SIGNATURE of Applicant or Assignee of Record

Signature	<i>Joseph T. Sommer</i>	Date	5/11/06
Name	JOSEPH T. SOMMER	Telephone	(462) 715-3176
Title and Company	President, GHL PC		x208

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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